



Docket No.: 002013.P013

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Re Application of:

Man-Soo Han, et al.

Application No.: 10/055,454

Filed: January 22, 2002

For: ADAPTIVE BUFFER PARTITIONING  
METHOD FOR SHARED BUFFER  
SWITCH AND SWITCH THEREFOR

REQUEST FOR REFUND

Honorable Commissioner of Patents  
and Trademarks  
Washington, D.C. 20231

Sir:

It is submitted that small entity status is applicable in connection with the above-identified patent application. Please refund \$370.00 overpayment of the filing fee for this patent application to Deposit Account 02-2666. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN

Date: 3/7/02

Eric S. Hyman Reg. No. 30,139

12400 Wilshire Blvd., 7<sup>th</sup> Floor  
Los Angeles, CA 90025  
(310) 207-3800

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, on

Melissa Stead

3-8-02

3-8-02

Date

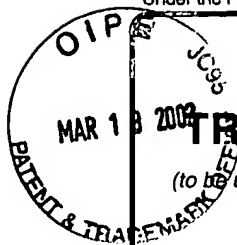
Dep & Ref

PTO/SB/21(08/00)

Approved for use through 19/30/2000. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	10/055,454
		Filing Date	January 22, 2002
		First Named Inventor	Man-soo Han
		Group Art Unit	
		Examiner Name	
Total Number of Pages in This Submission	5	Attorney Docket Number	2013P013

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input checked="" type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Return postcard</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Eric S. Hyman, Reg. No. 30,139 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN
Signature	
Date	3/8/02

CERTIFICATE OF MAILING (OR TRANSMISSION)			
I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail with sufficient postage in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on: <span style="border: 1px solid black; padding: 2px;">3-8-02</span>			
Typed or printed name	Melissa Stead		
Signature		Date	3-8-02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO E JC95  
MAR 18 2002  
PATENT & TRADEMARK OFFICE

# FEE TRANSMITTAL for FY 2002

*Patent fees are subject to annual revision.*

☐ Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$) \_\_\_\_\_

## Complete if Known

Application Number	10/055,454
Filing Date	01/22/02
First Named Inventor	Man-soo Han
Examiner Name	
Group Art Unit	
Attorney Docket Number	2013P013

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

Deposit Account Number: 02-2666  
Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments  
☒ Charge any additional fee(s) during the pendency of this application.  
☐ Charge fee(s) indicated below, except for the filing fee, to the above-identified deposit account

## FEE CALCULATION

### 1. FILING FEE

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
101	201	740	370	Utility filing fee	
106	206	330	165	Design filing fee	
107	207	510	255	Plant filing fee	
108	208	740	370	Reissue filing fee	
114	214	160	80	Provisional filing fee	

**SUBTOTAL (1)** (\$) \_\_\_\_\_

### 2. CLAIMS

Total Claims	Extra	Fee from below	Fee Paid
18	X		
3	X		

Multiple Dependent Claims

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
103	203	18	9	Claims in excess of 20	
102	202	84	42	Independent claims in excess of 3	
104	204	280	140	Multiple Dependent claim	
109	209	84	42	Reissue independent claims over original patent	
110	210	18	9	Reissue claims in excess of 20 and over original patent	

**SUBTOTAL (2)** (\$) \_\_\_\_\_

*\*\*or number previously paid, if greater, For Reissues, see above*

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEE

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
105	205	130	65	Surcharge - late filing fee or oath	
127	227	50	25	Surcharge - late provisional filing fee or cover sheet.	
139	139	130	130	Non-English specification	
147	147	2,520	2,520	For filing a request for <i>ex parte</i> reexamination	
112	112	920	920	Requesting publication of SIR prior to Examiner action	
113	113	1,840	1,840	Requesting publication of SIR after Examiner action	
115	115	110	55	Extension for response within first month	
116	116	400	200	Extension for response within second month	
117	117	920	460	Extension for response within third month	
118	118	1,440	720	Extension for response within fourth month	
128	128	1,960	980	Extension for response within fifth month	
119	119	320	160	Notice of Appeal	
120	120	320	160	Filing a brief in support of an appeal	
121	121	280	140	Request for oral hearing	
138	138	1,510	1,510	Petition to institute a public use proceeding	
140	140	110	55	Petition to revive - unavoidably	
141	141	1,280	640	Petition to revive - unintentionally	
142	142	1,280	640	Utility issue fee (or reissue)	
143	143	460	230	Design issue fee	
144	144	620	310	Plant issue fee	
122	122	130	130	Petitions to the Commissioner	
123	123	50	50	Petitions related to provisional applications	
126	126	180	180	Submission of Information Disclosure Stmt	
581	581	40	40	Recording each patent assignment per property (times number of properties)	
146	146	740	370	Filing a submission after final rejection (37 CFR 1.129(a))	
149	149	740	370	For each additional invention to be examined (37 CFR 1.129(b))	
179	179	740	370	Request for Continued Examination (RCE)	
169	169	900	900	Request for expedited examination of a design application	

Other fee (specify) \_\_\_\_\_

**SUBTOTAL (3)** (\$) \_\_\_\_\_

\* Reduced by Basic Filing Fee Paid

## SUBMITTED BY

Complete (if applicable)

Typed or Printed Name	Eric S. Hyman, Reg. No. 30,139	Registration No. (Attorney/Agent)		Telephone	(310) 207-3800
Signature				Date	3/8/02

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.